**TIONAL** 

FEE

RATE

X\$18=

X80=

+270=

ADDIT. FEE

TOTAL

|  |                |   |              |                               |                       |   |                     | Application or Docket Number |                          |                     |                            |                        |  |
|--|----------------|---|--------------|-------------------------------|-----------------------|---|---------------------|------------------------------|--------------------------|---------------------|----------------------------|------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECO<br>Effective October 1, 2000   |                |   |              |                               |                       |   |                     |                              | 00-                      | <b>.</b> . !        | 10.10                      |                        |  |
| Encoure October 1, 2000  |                |   |              |                               |                       |   |                     | 09741917                     |                          |                     |                            |                        |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |                |   |              |                               |                       |   |                     | SMALL ENTITY TYPE            |                          |                     | OTHER THAN OR SMALL ENTITY |                        |  |
| TC   | TAL CLAIMS     |   |              |                               |                       |   | Γ                   | RATE                         | FEE                      | 1                   | RATE                       | FEE                    |  |
| FOR  |                |   | NUMBER FILED |                               | NUMBER EXTRA          |   |                     | BASIC FEE                    | 355.00                   | OR                  | BASIC FEE                  | ·710.00                |  |
| ΤO   | TAL CHARGEA    | BLE CLAIMS                                | 5 minus 20=  |                               | •                     |   |                     | X\$ 9=                       |                          | OR                  | X\$18=                     |                        |  |
| IND  | EPENDENT CL    | AIMS                                      | minus 3 =    |                               | •                     |   |                     | X40=                         |                          | OR                  | X80=                       | /                      |  |
| MU   | LTIPLE DEPEN   | IDENT CLAIM P                             | RESENT       |                               |                       |   |                     | +135=                        |                          |                     | +270=                      | /_                     |  |
| * If   | the difference | in column 1 is                            | less than ze | ero, ente                     | r "0" in c            | olumn 2                                       | TOTAL               |                              |                          | OR<br>OR            | TOTAL                      | 7(0)                   |  |
| OLAIMO AO AMENDER DARTII   |                |   |              |                               |                       |   |                     | IOIAL                        | <u> </u>                 | Un                  |                            |                        |  |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)   |                |   |              |                               |                       |   |                     | SMALL                        | ENTITY                   | OR                  | OTHER<br>SMALL I           | THAN<br>ENTITY C       |  |
| AMENDMENT A  |                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGH<br>NUM<br>PREVIO<br>PAID | IEST<br>IBER<br>OUSLY | PRESENT<br>EXTRA                              |                     | RATE                         | ADDI-<br>TIONAL<br>FEE   |                     | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total          | •   | Minus        | **                            |                       | =   | X\$                 | X\$ 9=                       |                          | OR                  | X\$18=                     |                        |  |
|  | Independent    | <b>*</b> :                                | Minus        | ***                           |                       | =   |                     | X40=                         |                          | OR                  | X80=                       |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                |   |              |                               |                       |   |                     | +135=                        |                          | OR                  | +270=                      |                        |  |
| 는 1700년 2월 1일한 일본 11일 전 1800년 - 12일 전 1800년 - 12일 전 1800년 - 12일 전 1800년 - 12일 전<br>세계 - 12일 제공 전 1800년 - 12일 전 |                |   |              |                               |                       |   | TOTAL<br>ADDIT. FEE |                              | OR                       | TOTAL<br>ADDIT. FEE |                            |                        |  |
| (Column 1) (Column 2) (Column 3)   |                |   |              |                               |                       |   |                     |                              |                          |                     |                            |                        |  |
| MENT B   |                | CLAIMS REMAINING AFTER AMENDMENT          |              |                               | IBER<br>OUSLY<br>FOR  | PRESENT<br>EXTRA                              |                     | RATE                         | ADDI-<br>TIONAL<br>- FEE |                     | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
| NON  | Total          | . 5                                       | Minus        | " ×                           | 0                     | = 0   | ] [                 | X\$ 9=                       |                          | OR                  | X\$18=                     | 0                      |  |
| AMEND  | Independent    |   | Minus        | ***                           | 3                     | <u> =                                    </u> | [                   | X40=                         | •/                       | OR                  | X80=                       | 0                      |  |
| Ļ  |                | NTATION OF M                              | ULTIPLE DEF  | PENDEN                        | CLAIM                 |   | 1                   | +135=                        | /                        | OR                  | `+270=                     | 0                      |  |
|  | •              |   |              |                               |                       |   | L                   | TOTAL<br>DDIT. FEE           |                          | OR                  | TOTAL<br>ADDIT. FEE        | 0                      |  |
|  |                | (Column 1)                                | •            | (Colu                         | mn 2)                 | (Column 3)                                    |                     |                              | 7                        | -                   |                            |                        |  |
| o  |                | CLAIMS                                    |              | HIGH                          |                       | DDESENT                                       | Ìг                  |                              | ADDI-                    | 1                   |                            | ADDI-                  |  |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

**AFTER** 

**AMENDMENT** 

Minus

Minus

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

**PREVIOUSLY** 

PAID FOR

**EXTRA** 

Total

Independent

OR

OR

OR

OR

TIONAL

FEE

RATE

X\$ 9=

X40=

+135=

ADDIT. FEE

TOTAL